

E. C. / B.P.D.E.S. DISCHARGE PERMIT APPLICATION

FOR BSA USE ONLY

DATE APPLICATION REC'D: _____

INDUSTRIAL NUMBER: _____

INVESTIGATOR: _____

PART A - GENERAL INFORMATION

A1. Applicant Business Name _____

A2. Address of premises discharging wastewater:

Street City State Zip

A3a. Business Address (if different than above):

Street City State Zip

b. Mailing Address (if different than above):

Street City State Zip

A4. Chief Business Official:

Name: _____ Title: _____

A5. Facility Representative:

Name: _____ Title: _____ Phone: _____

A6. Person to be contacted about this application, if different from above:

Name: _____ Title: _____ Phone: _____

A7. Person to be contacted in case of emergency, if different from above:

Name: _____ Day Phone: _____ Night Phone: _____

Fax: _____

A8. Confidentiality:

Please indicate those sections of this questionnaire that you wish to remain confidential and your basis for requesting confidentiality.

I have personally examined and am familiar with the information submitted in this document and attachments. Based upon my inquiry of those individuals immediately responsible for obtaining the information reported herein, I believe that the submitted information is true, accurate and complete. I am aware that there are significant penalties for submitting false information.

Date

Signature of Official (Seal if Applicable)

PART B - BUSINESS DESCRIPTION

PURPOSE -The business description is primarily used to determine the substances which may enter into the wastewater discharge from the business activity.

B1. Brief Description: _____

B2. Business Activity: Standard Industrial Classification (SIC) Codes for Principal Products or Services:

<u>Activity</u>	<u>SIC Code (4 Digits)</u>	<u>Production (Monthly Avg.)*</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

B3. Is there a scheduled shutdown? Yes____ No____ If yes, when? _____

B4. Is production seasonal? Yes____ No____ If yes, explain, indicating month(s) of peak production: _____

B5. Average number of employees per shift: 1st _____ 2nd _____ 3rd _____

Shift start times: 1st _____ 2nd _____ 3rd _____

Shift end times: 1st _____ 2nd _____ 3rd _____

Shifts normally worked each day:

	<u>Sun.</u>	<u>Mon.</u>	<u>Tue.</u>	<u>Wed.</u>	<u>Thu.</u>	<u>Fri.</u>	<u>Sat.</u>
1st	_____	_____	_____	_____	_____	_____	_____
2nd	_____	_____	_____	_____	_____	_____	_____
3rd	_____	_____	_____	_____	_____	_____	_____

* Monthly average stated shall be the highest monthly average production in the previous five years.

PART C - WATER SOURCE AND USE

PURPOSE - The Water Source and Use information will enable BSA to determine the Volumes and Sources of wastewater discharged to the BSA sewer.

WATER/WASTEWATER DATA

C1. Water Sources	Average Volume (Gallons per Day)	Peak Flow&Estimated Duration (Gallons per Minute&Time)
Municipal System	_____	_____
Recycled	_____	_____
Private Wells	_____	_____
Other (Specify) _____	_____	_____
Water Account No.(s)	_____	_____
	_____	_____
C2. Water Usage	Average Volume (Gallons per Day)	Peak Flow&Estimated Duration (Gallons per Minute&Time)
Cooling Water	_____	_____
Boiler Makeup	_____	_____
Process Water	_____	_____
Sanitary Purposes	_____	_____
Other (Specify) _____	_____	_____
C3. Waste Water Discharge	Average Discharge (Gallons per Day)	Peak Discharge&Estimated Duration (Gallons per Minute&Time)
Municipal Sewer/Sanitary		
- Process	_____	_____
- Sanitary	_____	_____
- Cooling	_____	_____
Non-Sewered Discharges		
- Natural Receiving Water	_____	
- Storm Drain	_____	
- Waste Hauler	_____	
- Evaporation	_____	
- Contained in Product	_____	
- Recycled	_____	
- Other (Specify) _____	_____	
C4. Is your facility permitted to discharge liquid wastes under a State (S.P.D.E.S.) Permit?		
Yes _____ No _____ Permit No. _____		
C5. Does your facility have a wastewater discharge from any air pollution control equipment?		
Yes _____ No _____		

PART D - SUBSTANCES OF CONCERN

(REFER TO ATTACHED TABLE D)

Complete all information for those substances your facility has used, produced, stored, distributed, listed under the TRI report or otherwise disposed of since last application. Do not include chemicals used only in analytical laboratory work. Enter the name and code from Table I. If facility uses a substance in any of the Classes A-M which is not specified in the list, enter it as code class plus 99, e.g. B99 with name, usage, etc.

[illegible]

TABLE 1 - SUBSTANCES OF CONCERN

CLASS A - HALOGENATED HYDROCARBONS	CLASS B - HALOGENATED ORGANICS (other than hydrocarbons)	CLASS C - PESTICIDES (including herbicides, algacides, biocides, fungicides and molluscicides)	CLASS F - SUBSTITUTED AROMATICS (other than hydrocarbons and non-halogenated)
A01 Methyl chloride	B01 Phosgene	C01 Aldrin/Dieldrin	F01 Phenol, cresol, or xylol
A02 Methylene chloride	B02 Methyl Chloromethyl ether	C02 Chlordane and metabolites	F02 Catechol, resorcinol, or hydroquinone
A03 Chloroform	B03 bis-chloromethyl ether	C03 DDT and metabolites	F03 Nitrophenols
A04 Carbon tetrachloride	B04 Other chloroalkyl ethers	C04 Endosulfan/Thiodan and metabolites	F04 Nitrobenzenes
A05 Freon/Genatron	B05 Benzoyl chloride	C05 Endrin and metabolites	F05 Nitrotoluenes
A06 Other halomethanes	B06 Chloroform	C06 Heptachlor and metabolites	F06 Aniline/A10 Vinyl chloride
A07 1, 1, 1-Trichloroethane	B07 Chlorinated phenol	C07 Malathion	F07 Toluidines
A08 Other haloethanes	B08 Chlorinated cresols or xylenols	C08 Methoxychlor	F08 Nitroanilines
A09 Vinyl fluoride	B09 Chloroacetic acid	C09 Parathion	F09 Nitroanisole
A11 Dichloroethylene	B10 Chloroalkyl ethers	C10 Toxaphene	F10 Toluene diisocyanate
A12 Trichloroethylene	B11 Dichlorophene or hexachlorophene	C11 Sevin	F11 Dimethylaminobenzene
A13 Tetrachloroethylene	B12 Chlorinated aniline (including methylene bis (2-chloroaniline))	C12 Kelthane	F12 Benzoic Acid (and Benzoate salts)
A14 Chlorinated propane	B13 Dichlorobenzidine	C13 Diazinon	F13 Phthalic, isophthalic or terephthalic acid
A15 Chlorinated propene	B14 Chlorinated diphenyl oxide	C15 Carbaryl	F14 Phthalic anhydride
A16 Hexachlorobutadiene	B15 Chlorinated toluidine	C16 Silvex	F15 Phthalate esters
A17 Hexachlorocyclopentadiene	B16 Kepone (C ₁ 00) 10 1	C17 Dithiocarbamates	F16 Phenoxycetic acid
A18 Chlorinated benzene	B17 Dichlorovinyl sulfonyl pyridine	C18 Maneb	F17 Phenylphenols
A19 Chlorinated toluene	B18 Chloropicrin	C19 Dioxathion	F18 Nitrophenyls
A20 Fluorinated toluene	B20 Trichloro-propylsulfonyl pyridine	C20 Tandem/Karbutilate	F19 Aminobiphenyls (including benzidine)
A21 Polychlorinated biphenyl (PCB)	B21 Tetrachloro-methylsulfonyl pyridine	C21 Carbofurans	F20 Diphenylhydrazine
A22 Chlorinated naphthalene	B22 Tetrachloro-isophthalonitrile	C22 Pentac	F21 Naphthylamines
A23 Decchlorane (C ₁ 2) 10 1	B99 Halogenated organics not specified above	C23 Folpet	F22 Carbazole
A99 Halogenated hydrocarbons not specified above		C24 Diclhone	F23 Acetylaminofluorene
		C25 Rotenone	F24 Dyes and organic pigments
		C26 Lindane/Isotox	F25 Pyridine
		C27 Simazine	F99 Substituted aromatics not specified above
		C28 Methoprene	
		C99 Pesticides not specified above	
CLASS D - AROMATIC HYDROCARBONS	CLASS G - MISCELLANEOUS	CLASS M - METALS AND THEIR COMPOUNDS	
D01 Benzene	G01 Asbestos	M01 Antimony	M15 Manganese
D02 Toluene	G02 Acrolein	M02 Arsenic	M18 Titanium
D03 Xylene	G03 Acrylonitrile	M03 Beryllium	M21 Tungster
D04 Biphenyl	G04 Isophorone	M04 Cadmium	M22 gold
D05 Naphthalene	G05 Nitrosamines	M05 Chromium	M83 Pladium
D06 Ethylbenzene	G06 Ethyleneimine	M06 Copper	M84 Platinum
D07 Styrene	G07 Propiolactone	M07 Lead	M99 Metals not specified above
D08 Acenaphthene	G08 Nitrosodimethylamine		
D09 Fluoranthene	G09 Dimethyl hydrazine		
D99 Aromatic hydrocarbons not specified above	G10 Maleic anhydride		
	G11 Methyl isocyanate		
	G12 Epoxides		
	G13 Nitrofurans		
	G14 Cyanide		
CLASS E - TARS			
E01 Coal tar			
E02 Petroleum tar			

If you use chemicals of unknown composition, list trade name or other identification, name of supplier and complete information.

NAME	AVERAGE ANNUAL USAGE	AMOUNT NOW ON HAND	SUPPLIER	PURPOSE OF USE (STATE WHETHER PRODUCED, REACTED, BLENDED, PACKAGED, DISTRIBUTED, NO LONGER USED)

Are you presently permitted to discharge radiological waste by the N.Y.S.D.E.C.? Yes ____ No ____

PART E - MISCELLANEOUS

E1. Do you have automatic sampling equipment or continuous wastewater flow metering equipment currently in use or included in future plans?

Current: Flow Metering Yes ____ No ____ Sampling Equipment Yes ____ No ____

Planned: Flow Metering Yes ____ No ____ Sampling Equipment Yes ____ No ____

E2. Does your facility pretreat any wastewater prior to discharge to a sanitary sewer? Yes ____ No ____

If so, please show locations of pretreatment processes on attached schematic process diagram (Part F) and describe below:

E3. Do you have a Spill Prevention, Containment and Control Plan (SPCC) for your plant? Yes ____ No ____

E4. Do you have a Solvent Management Plan or a Toxic Organic Management Plan? Yes ____ No ____

E5. Do you generate any liquid or solid waste such as solvents, electroplating sludges, thinners, oils, still bottoms, fly ash, filler, etc? Yes ____ No ____

If yes, please fill out the following table:

TYPE OF WASTE	IF THIS WASTE IS PRODUCED BY PRETREATMENT CHECK HERE	AMOUNT PER YEAR (SPECIFY LBS, TONS OR GALS)	METHOD OF DISPOSAL <u>CHECK EACH METHOD USED</u>				
			ON-SITE	SANITARY LANDFILL	HAZARDOUS WASTE FACILITY	RECLAIMED OR RESUED	OTHER

E6. Description of Disposal Method:

a. Disposal Site

b. Hazardous Waste Hauler - Please give name and address _____

c. Reclaimed or Reused - Please describe process, if on-site, or give name and address of reclaimer

d. Other - Please describe _____

E7. Do you store any hazardous wastes on-site? Yes ____ No ____

E8. Have you filed an EPA Form 8700-12 (Notification of Hazardous Waste Activity)? Yes ____ No ____
If yes, please attach.

E9. What is your Hazardous Waste Number? _____

E10. Do you discharge into the Buffalo Sewer Authority a waste identified by 40 CFR 261 a hazardous waste?
Yes ____ No ____

E11. If your facility is discharging a hazardous waste, have you properly notified the Buffalo Sewer Authority?
Yes ____ No ____

PART F - SCHEMATIC FLOW DIAGRAM

PURPOSE - The Schematic Flow Diagram shows the flow pattern of products through the facility and the various sources of wastewater.

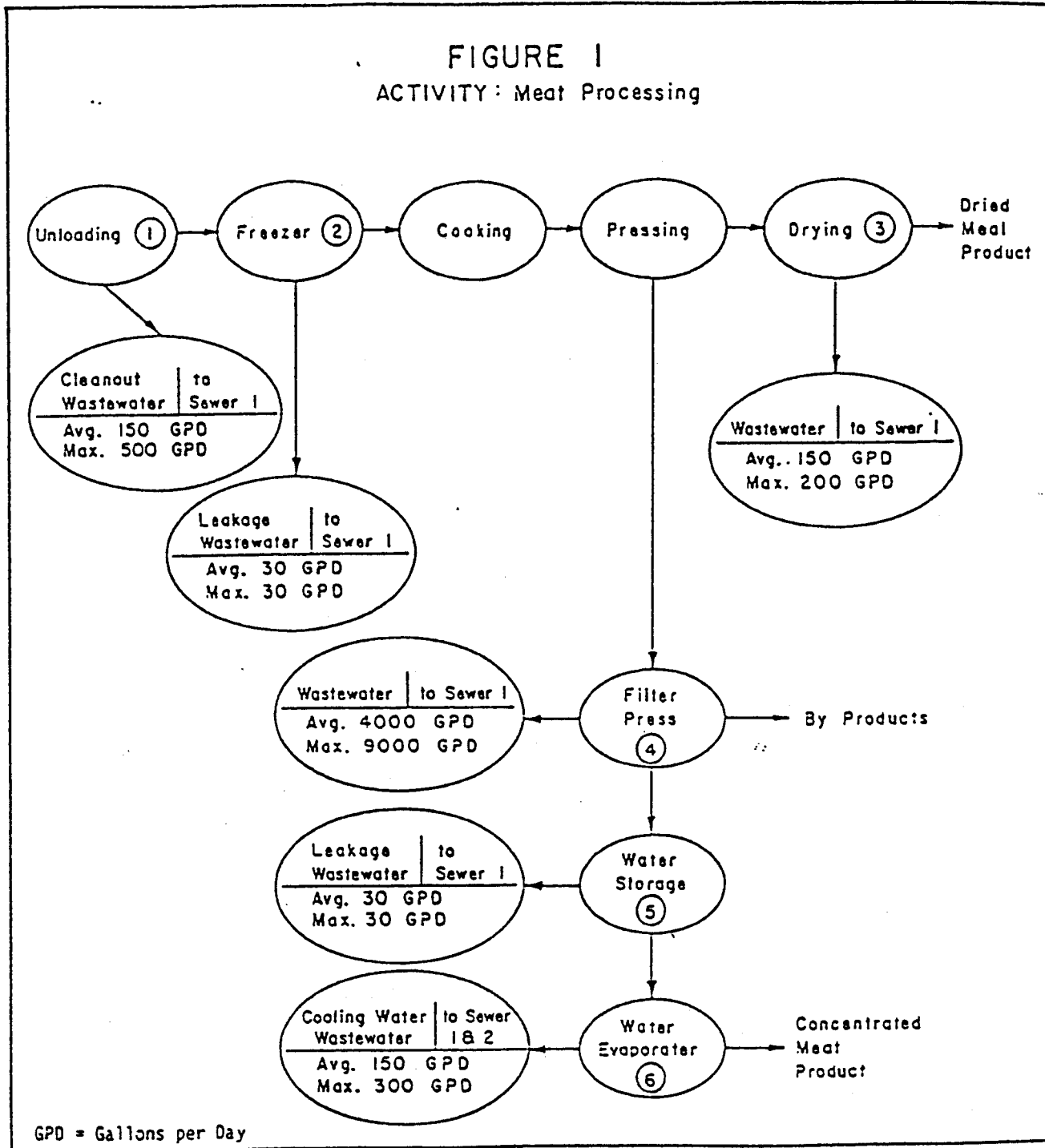
F. Schematic Flow Diagram - For each major activity in which wastewater is generated, draw a diagram of the flow of materials and water from start to completed project, showing all unit processes generating wastewater. Number each unit process having wastewater discharges to the community sewer.

General Instructions - Type or print the information. A separate Part F should be completed for each major business activity described in Part B.

A line drawing (schematic flow diagram) of each major business activity described in Part B is to be drawn in on an attached sheet of paper (all sheets should be letter size). Number each process which generates wastewater using the same numbering as in the building layout or plant site plan shown in Part G. An example of drawing required is shown in Figure 1.

To determine your average daily volume and maximum daily volume of wastewater flow you may have to read water meters, sewer meters, or make estimates of volumes that are not directly measureable.

FIGURE 1
ACTIVITY: Meat Processing



PART G - BUILDING LAYOUT

PURPOSE - The building layout shows the wastewater generating operations which contribute to each side sewer.

INSTRUCTIONS FOR COMPLETING PART G: General Instructions - Type or print the information.

Building Layout - A building layout or plant site plan of the premise is required to complete Part G. An arrow showing north as well as the map scale must be shown. The location of each existing and proposed sampling manhole and side sewer must be clearly identified, including distances as well as all sanitary and wastewater drainage plumbing. Number each unit process discharging wastewater to the community sewer. Use the same numbering system shown in Part F (Schematic Flow Diagram). An example of the drawing required is shown below in Figure 2.

